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Chapter Three

The policy prominence of wellbeing and the implications for education

Malcolm Thorburn

Abstract

How to ensure young people are *well* is an easier question to ask than to plan for in wellbeing policy terms with the question often dividing educationalists, policy makers and politicians. The chapter discusses the theoretical influences which often shape and inform wellbeing policy and contrasts policy developments across the Anglophone world (in particular, in England, Australia and New Zealand). This approach is designed to help readers better understand policy influences and the ways in which curriculum arrangements and pedagogical practices can potentially engage with points of contestation which surround wellbeing policy, both within education and as part of public policy more widely.

Introduction

In earlier chapters (Chapters One & Two) we have highlighted how a greater conceptual awareness of wellbeing may help educators ensure that young people's lives are more fulfilling and meaningful. The task now is to consider how wellbeing plans are being taken forward in public policy and the extent to which these policies are clear, satisfactory and adequate; as in recent years there has been an increased expectation that schools can be a pivotal force for good in helping young people's lives to become more satisfying and noteworthy (White, 2011). These intentions reflect the heightened global interest there is in wellbeing and the aspirations there are in educational policies to try and constructively connect wellbeing with whole school curriculum planning and pedagogical advice. Within the general discussion of the aims and purposes of wellbeing policy, a review of whether wellbeing could (and should) be measured and the extent to which this might benefit learners' progress is also considered. In addition, the chapter contrasts developments across the Anglophone world (predominantly in England, Australia and New Zealand) in order to better understand policy direction and planning arrangements over recent years. For as Sinnema (2016, p. 966) notes, the policy focus in England and Australia is much more based on a 'tightening of national control, prescription and regulation over curriculum, with expanding curriculum content and a more explicit emphasis on core knowledge', whereas in New Zealand the

focus is more on teachers using their professional autonomy to make decisions about curriculum content and implementation.

The two chapters in this section of the book therefore review the broad societal prominence of wellbeing and their implications for educational policy making and practice (Chapter Three) prior to focusing on a detailed evaluation of policy efforts to enhance health and wellbeing in Scottish secondary schools (Chapter Four). This width and depth focus is designed to add to the current evidence base on wellbeing as part of education policy and to identify some of the problematic issues which remain outstanding if wellbeing is to contribute to a range of positive outcomes for young people. As highlighted in the opening two chapters defining wellbeing is problematic, so the intention is not to reengage with these concerns and arguments but rather to note that from a policy perspective it matters what definition and view of wellbeing policy makers are taking forward. For as Coleman, (2009) attests, how wellbeing is defined influences how wellbeing is audited as part of school inspection regimes and how wellbeing progress is reviewed relative to similar curriculum initiatives e.g., programmes relating to social and emotional learning, character education and citizenship.

Focusing on some of the theories and issues informing policy can aid understanding of public policy. Making progress on this basis requires reviewing the most fundamental matters e.g., what policy measures exist for wellbeing, what types of theoretical thinking informed their development and what might this mean for teachers' future professional role. A further issue is the role of the policy community in driving policy direction, and of how precisely wellbeing policies are framed with regard to educational agendas and with regard to the social and political views of different supra national bodies and third sector groups (i.e., national organisations comprising non-governmental and non-profit-making associations, including charities, social enterprises, voluntary and community groups and cooperatives) who view education systems as a way of improving world

circumstances. Therefore, while Cairney (2012) notes that the policy process is invariably complex, messy and unpredictable, he also recognizes that issues of policy governance are likely to impact on the relationships between *policy conditions* (e.g., the specific wellbeing challenges policy makers face), *structural considerations* (e.g., schooling arrangements such as the school day/week/year) and *agency considerations* (e.g., the capacity of teachers to bring about the types of improvements to wellbeing which are intended).

Why is wellbeing part of public policy?

The prominence of measuring policy in areas such as health, economics and employment has broadened out in recent years to include wellbeing as a more subjective feature of public policy. For example, Layard, Clark, Cornaglia, Powdthavee & Vernoit (2013) conceive that a happy and successful adult life is likely to be founded upon a number of interconnected issues including: family background (e.g., economic, psycho-social factors); adult outcomes (e.g., income, educational level, employment, physical and emotional health) and childhood influence (e.g., intellectual development, school life and wellbeing). In this context, schools are considered as pivotal in relating education to learners' social, emotional, mental and physical wellbeing and to broader childhood influences 'as education is seen as a key factor in developing capacities not only for work and civic engagement, but also for experiencing a flourishing life' (Soutter, O'Steen & Gilmore, 2012, p. 112). Coleman (2009) notes, there are many influences at work here including the general emotional literacy of learners (Chapter Nine), improving social justice and reducing inequalities (Chapter Ten) and a broader focus on health promotion in schools (Chapter Four). This breadth of perspective highlights the multi-various influences there are on achieving a happy and successful life. However, it also needs to be noted that there are those with an interest in political liberalism who argue that 'liberal societies should not base policy on comprehensive religious, moral or philosophical doctrines that many reasonable citizens may not accept' as this may advantage some citizens at the expense of others (Wren-Lewis, 2013, p. 2). Nevertheless, even

authors such as Wren-Lewis (2013) recognize that there are good grounds for wellbeing policies promoting the public good and this is very likely to include areas such as education and health policy.

Main Findings

A feature of analyzing wellbeing policy is trying to understand the thinking which informs policy. Often thinking can remain rather unacknowledged in policy with statements asserted rather than explained and justified. Dolan, Layard & Metcalfe (2011) advise that for an account of wellbeing to be useful in policy it needs to satisfy three general conditions, namely that it is: *theoretically rigorous; policy relevant and empirically robust*. By theoretically rigorous, Dolan et al., (2011) mean that the account of wellbeing provided is underpinned by sound philosophical theory. By policy relevant the authors mean that accounts provided for wellbeing are politically and socially acceptable as well as straightforward to understand. By empirically robust, the authors consider that the account of wellbeing policy chosen can be measured in quantitative ways that are reliable and valid. Three areas of thinking which may have the potential to inform policy are discussed relative to the three criteria for effective wellbeing policy set out by Dolan et al., (2011). Thereafter, a review of wellbeing policy-related developments underway in England, Australia and New Zealand are discussed with a particular focus on policy relevance and coherence.

The task therefore for readers during the main part of the chapter is to review:

- The extent to which the three theorizing influences on wellbeing discussed are *theoretically rigorous* and underpinned by sound philosophical theory;
- Whether wellbeing policy-related developments underway in England, Australia and New Zealand are *policy relevant* in terms of being politically and socially acceptable, and

- Whether the review of theorizing influences and policy developments in England, Australia and New Zealand provide the basis for collecting *empirically robust* findings which can be measured in quantitative ways that are reliable and valid.

Wellbeing theorizing influences - objective and/or subjective measurements of wellbeing

Wellbeing as part of interconnected public policy contains *objective* influences (e.g., peoples, income levels, quality of housing, health and transport) and more *subjective* influences (e.g., level of happiness and other psychological indicators). Haybron & Tiberius (2015) consider that one farsighted example of *objective* and *subjective* influences working together is in Bhutan (a small landlocked country in the Eastern Himalayas in Central Asia with a population of less than one million people) where they reference wellbeing as part of their gross national happiness (GNH) index. The index is comprised of responses to questions in nine areas: psychological wellbeing; population health; education; living standards; good governance; community vitality; time use; ecological resilience and diversity and cultural resilience and diversity (Centre for Bhutan Studies, 2015). Findings showed that less than one in ten citizens (8.8%) were unhappy with the remaining citizens being to various degrees happy. Within this broad finding it was noted more specifically that: men were happier than women; people living in urban areas were happier than rural residents; educated people were happier and farmers were less happy than other occupational groups (Centre for Bhutan Studies, 2015). By contrast, the more typical measure used in the Anglophone world is too quantitatively (objectively) measure countries economic activity (i.e., the monetary value of all goods and services produced within a nation's geographic borders over a specified period of time) as a way of defining a country's gross domestic product (GDP). At face value, we might consider that the GNH index is a more sensitized and enlightened measurement i.e., based on the type of wellbeing-related values chosen and the idea of public goods policy highlighted by Wren-Lewis (2013). However, within complex western countries with large populations others might consider there is a need to more obviously measure *economic* (e.g. level of economic activity, income levels,

transport infrastructure) and *public* (e.g. wellbeing in education) policy goals, as economic arguments play a considerable part in deciding whether people can satisfy their preferences and achieve their life goals. Therefore, for those in the Anglophone world, analyzing wellbeing policy often involves considering economic *and* public influences on policy. For example, the Legatum Institute (2014), an independent non-partisan public policy organization whose research, advances ideas and policies in support of free and prosperous societies around the world, argue for a *prosperity* index based on measuring wealth and wellbeing as it recognizes ‘that the era of GDP being the unique measure is now over’ (Legatum Institute, 2014, p. 16).

One of the main policy devices used for collecting economic and public policy information is to collect large sets of (*objective*) data e.g., through large surveys. Potentially this allows general findings to emerge which can then be scrutinized in more specific ways in order to identify and profile a broad range of (*subjective*) influences on wellbeing. The main challenge with such approaches at the level of wellbeing policy is that while people may have similar objective profiles e.g., similar levels of income and health, they could have very different levels of subjective wellbeing based on their relative levels of confidence, happiness and self-esteem (McLellan & Stewart, 2015). Thus, there is a need for a degree of caution if predominantly using objective measurements of wellbeing as the main basis for policy planning - relative to using a mixed methods approach (quantitative and qualitative) where objective and subjective information is collected e.g. through collecting a broad range of data via survey type set questionnaire responses and merging this with open ended questions and/or interviews findings with a smaller sample of people. Such an approach is likely to yield more insightful findings provided acknowledgement is taken of the research context e.g., through considering the interrelationship between policy conditions and structure and agency considerations (Cairney, 2012). This would be evident, for example, when collecting data which acknowledged the importance of: school catchment area; legal

status; curriculum specialism; learner selection criteria; type of academy as well as other factors such as gender and age and stage of learners (McLellan & Stewart, 2015).

Among the largest ongoing collection of data on children's wellbeing is the series of '*Good Childhood Reports*' collated by '*The Children's Society*' in collaboration with the University of York. Findings for the reports use a mixed method research approach through merging children's responses to set survey questions while also allowing space for children to include their answers to more open ended questions. Furthermore, the survey has evolved over the last decade in response to topics and themes which have emerged from earlier findings. This approach enables progress and trends in children's wellbeing in England and findings in England relative to evidence from children in 14 other countries worldwide to inform the research design (The Children's Society, 2015). This research approach enables policy stakeholders to *diagnostically* review research findings in order to inform future policy. If effective, the policy process can *proactively* highlight how aspiration and arguments for change are drawing upon research concerns identified. In relation to the international comparison data collected from a representative sample of children aged 8/9 years, 10/11 years and 12/13 years, evidence from The Children's Society (2015) highlights that children in England had relatively low levels of subjective wellbeing compared with young people in the majority of other countries. For example, in 24 of the 30 aspects of life questions asked about children in England responses were in the lower half of countries sampled. Responses were of particular educational concern with regard to: life satisfaction (14th out of 15 countries); self-confidence (15th out of 15 countries); relationships with teachers (14th out of 15 countries); school experience (12th out of 15 countries); health (13th out of 15 countries); relationships with other children in the class (14th out of 15 countries) feeling positive about the future (11th out of 15 countries); and happiness in the last two weeks (11th out of 15 countries). In fact, it was mostly in areas which are indirect to schools e.g., friends (6th out of 15 countries), freedom (8th out of 15 countries) and amount of opportunities (8th out of 15 countries) where more average comparisons were evident. It is not the purpose of this

chapter to discuss the detail of these findings at length, beyond registering the importance of policy communities (however established and influenced) avoiding complacency when presented with this type of evidence. It is also worth noting that the validity and reliability of these findings is enhanced by the ongoing *monitoring* and *benchmarking* of children's subjective wellbeing, as this approach enables young people's wellbeing to be tracked over time and strategies designed to enhance wellbeing. Studies such as The Children's Society series of reports also highlight the benefits of further research e.g., in areas such as the extent to which learners feel connected with school, learners relationships with teachers and the extent to which schools are an enabling institution which is a closely integrated part of the learning community (Gray et al., 2011; Noble & McGrath, 2015).

Wellbeing theorizing influences - pragmatic subjectivism

In order to know more about the multiple factors which might influence wellbeing, Haybron and Tiberius (2015) consider that *pragmatic subjectivism* offers constructive possibilities for informing wellbeing policy. This is on the basis that public decision making procedures for wellbeing should, where possible be subjective in practice, as this 'represents a workable approach given the diversity of values in modern democratic societies' (Haybron & Tiberius, 2015, p. 714). Thus, while the authors recognize that there are other approaches to wellbeing such as capabilities approaches (Nussbaum, 2011) they argue that promoting wellbeing should be among the approaches policy makers consider adopting. This is based on a definition of wellbeing which recognizes that bettering people's lives should take place according to people's own standards. Therefore, pragmatic subjectivism encourages policymakers to use the best available research and information of what people value and to consider this closely in the framing of policy objectives. Such an approach effectively rules out the use of comprehensive (objective-type) metrics of wellbeing. Instead, what are required are more partial measures which cover important aspects of wellbeing. In spirit, pragmatic subjectivism (based as it is on treating people's values with respect) is a lot closer to the

GNH (Bhutan) approach used to measure personal welfare values than the GDP statistics which more often inform economic approaches to policy. However, the difficulty of pragmatic subjectivism is that it can be problematic for policymakers to simply help ‘themselves to a highly tendentious and sharply contested theoretical position in a field where they have no significant competence’ (Haybron & Tiberius, 2015, p. 718), especially when diverse theories of wellbeing exist (see Chapter Two). Therefore, reflecting Wren-Lewis (2013), Haybron and Tiberius (2015) take the view that governments should not endorse any particular conception of wellbeing and should instead advise that person-respecting welfarism (pragmatic subjectivism) should defer to individuals’ own conceptions of wellbeing in promoting their interests. This position raises issues about how subjective wellbeing data can be collected and measured. In this respect, the OECD (2013) in considering that subjective wellbeing is an important component of a better life (along with various objective wellbeing influences) have produced extended advice on how methodologically survey-based data on subjective wellbeing can be collected, measured and analysed.

Wellbeing theorizing influences - strengths-based approaches

Recently, there has been a move across a range of public services to utilize *strengths (or asset) based approaches* as a more effective way of helping people identify the factors which enhance their lives (Matthews, Kilgour, Christian, Mori & Hill, 2015). Strengths in this respect are considered as part of something which is connected with salutogenic health theory (Antonovsky, 1996) where health and wellbeing influences are multi-dimensional and holistic in nature i.e., encompassing social, psychological, spiritual and physical dimensions. As such, the foundations of salutogenic approaches are as much a theory of human beings as a theory of health, especially if health messages are presented as a set of fixed (and often unachievable) pathogenic end goals to aspire towards. For as McCuaig, Quennerstedt and Macdonald (2013) note, under salutogenic thinking achieving your goals does not involve reaching a definite end point; rather it is part of

something which is much more dynamic: a lifelong learning process or journey. On this basis, strengths-based thinking offers possibilities for connecting education with associated wellbeing concerns, as reflected in educational practices which, in part, emphasize learners' self-confidence, self-awareness and empathy for others. A similar approach is utilized in the aforementioned Children's Society reporting where one the three research questions informing the research is 'to consider positive aspects of children's lives rather than just negative behaviours' (The Children's Society, 2015, p. 12). Arguably, as well, following a strengths-based approach to wellbeing might help placate the concerns of Ecclestone and Hayes (2009), who as noted in Chapter Two, are dismayed by the therapeutic-type interventions taking place in schools and the tendency for learners to become dependent upon educators for their wellbeing under such circumstances. In this context, a strengths-based approach to wellbeing might be considered more constructive as it would focus on the health and wellbeing advantages you have rather than over dwelling on the health and wellbeing concerns you have. Strengths (or asset) based approaches contrast with deficit-based models of health improvement where public and professional services are designed to support individual and community needs. Friedli (2013) is critical of asset-based public health policies as the advantages they might create for particular individuals and social groups are overtaken by the *structural* issues which exist in societies and which create material inequalities e.g., poor housing. These inequalities contribute to profound disadvantages in communities and to people having a lack of *control* over how to positively influence their lives. These problems are compounded by neo-liberal welfare economics which 'sound the drum beat for the retreat of statutory, state provision of both public services and public health' (Friedli, 2013, p. 140).

These concerns notwithstanding, Matthews et al., (2015) used strengths (or asset) based thinking to inform their mixed method research design, through using the Personal Wellbeing Index – School Children, designed by Cummins & Lau (2005) alongside focus group interviews with learners aged between 11-16 years in one comprehensive school in South Wales. Findings were consistent in

many instances with The Children's Society (2015) report e.g., learners valued their independence, their friends and their material freedom. However, school transition stages (i.e., moving to secondary schools, impending exams and reviewing plans for after compulsory education) were linked to a lowering of subjective wellbeing. Findings from reports such as The Children's Society (2015) and Matthews et al., (2015) invite review over whether wellbeing is having a positive influence over young people's lives within existing curriculum planning and pedagogical approaches in schools.

Wellbeing policy and practice - the context in England

In England, personal, social, health and economic (PSHE) education is a non-statutory subject where it is considered unnecessary to provide standardized frameworks or programmes of study, as teachers are best placed to understand the needs of learners. Within these flexible curriculum arrangements, where wellbeing is part of PSHE, the expectation is that where appropriate teachers will make links with statutory curriculum requirements e.g., in areas such as the importance of physical activity and diet for a healthy lifestyle.

Citizenship education is by contrast a compulsory part of the curriculum at Key stages 3 & 4 and focuses on improving understanding of: Democracy and Justice; Rights and Responsibilities and Identities and Diversity. This is noted as a further area where wellbeing might make constructive curriculum connections (Department for Education, 2013). Under current plans funding has been provided to the PSHE association (as the lead national body) to work with schools to advise them on how best to design their curriculum arrangements and improve the quality of learning and teaching. In their online FAQ section on curriculum guidance, in answer to the question 'How do I fit PSHE education into the curriculum?' the response is 'We recommend that PSHE education should be taught in discrete lessons, supported by other learning opportunities across the curriculum, including the use of enhancement days where possible. This is the position taken by Ofsted' (PSHE, 2016).

Formby and Wolstenholme (2012) found that secondary schools frequently used discrete lessons and enhancement-type days as teaching approaches rather than integrating wellbeing with subject knowledge and learners' prior learning experiences. Formby and Wolstenholme (2012) also found that teachers often viewed wellbeing-related teaching as more of an obstruction than a benefit to the academic life of the school and therefore of little, if any help, in raising learners attainment. Thus, in only a few schools did the authors find evidence of learners' subjective perspective on their needs being seen as a constructive contributor to their educational achievement. Furthermore, Formby and Wolstenholme (2012) identified that teachers' often felt uncomfortable and lacking in confidence when engaging learners in discussions about their personal values and decision-making. Similarly, Byrne et al., (2016) found that with regard to teaching particular health issues that proportionately fewer preservice, newly qualified and early career teachers considered themselves knowledgeable, skilled and confident when covering sensitive topics such as sex and relationship education relative to other topics such as healthy eating. Therefore, while the PSHE association, do move on to mention the possibilities for integrated learning approaches as a supplement to discrete lessons, it may be that without more formal curriculum advice (and arguably statutory curriculum status) that wellbeing-related outcomes become one among many of the priorities schools face. This raises the possibility of variability in how schools take wellbeing agendas forward and also the possibility of quality assurance metrics, such as those set out in Ofsted (2015) school inspections guidelines defining how schools measure their progress. This is potentially problematic, as it could be argued that under the grade descriptors for personal development, behaviour and welfare (see criteria highlighted below) that there are relatively few distinguishing differences between schools classified as 'outstanding' and 'good'.

Outstanding (Ofsted, 2015)	Good (Ofsted, 2015)
Pupils can explain accurately and confidently how to keep themselves healthy. They make informed choices about healthy eating, fitness and their emotional and mental well-being. They have an age-appropriate understanding of healthy relationships and are confident in staying safe from abuse and exploitation.	The school's open culture promotes all aspects of pupils' welfare. Pupils are safe and feel safe. They have opportunities to learn how to keep themselves safe. They enjoy learning about how to stay healthy and about emotional and mental health, safe and positive relationships and how to prevent misuse of technology.
Pupils' spiritual, moral, social and cultural development equips them to be thoughtful, caring and active citizens in school and in wider society.	Pupils' spiritual, moral, social and cultural development ensures that they are prepared to be reflective about and responsible for their actions as good citizens.

Ofsted (2015, p. 52 & 53)

School based reviews against the expectations of Ofsted (2015) might make it difficult for teachers to know what areas of wellbeing are reasonable to address and measure at certain ages and stages of learning, and of how such developments can be evaluated. It might also run the risk that the focus becomes one of achieving objective measurement metrics rather than dwelling on the subjective experiences of each particular child (Watson, Emery & Bayliss, 2012).

By contrast, it could be argued that the flexibility available within wellbeing (as part of the broader area of PSHE) is quite an enlightened approach to take as within the messy complexity of schools 'one-size-fits-all policies (can) run aground when hitting the rocks of real life' (Ball, MacGuire & Braun, 2012, p. 149). Therefore, schools might consider building on the broad advice provided by Weare (2015) who outlined in generic terms the

types of planning and practice ideas schools should consider taking forward when promoting wellbeing. Central to advice is adopting a whole school approach which emphasizes strengths and capacities and which is sustained by supportive classroom climates and ethos. Adopting this longer term approach is considered preferable to shorter term interventions such as the enhancement type thematic days PSHE (2016) recommends but which Formby and Wolstenholme (2012) found to be ineffective. Consistent with this approach is ensuring that teachers are *well* and have access to professional learning support (Bryne et al., 2016) and in addition that, learners' and parents/carers are involved in sharing their wellbeing aspirations. Weare (2015, p. 5) recognizes however that within 'the complex world of the secondary school, whole school approaches need to be developed incrementally, with the total commitment of the senior leadership team, starting small with realistic expectations and proceeding strategically.' This brief review of wellbeing as part of PSHE in England has shown that there is only a partial tightening of national control and regulation at this time (Sinnema, 2016) with the challenge being for schools to maximize the curriculum flexibility presently available at the same time as ensuring national quality assurance standards are met.

Wellbeing policy and practice - the context in Australia

In Australia, preparations for the first national curriculum adopt a seven-fold generic capabilities approach as a device for enhancing cross-curriculum learning and teaching (Australian Curriculum Assessment and Reporting Authority [ACARA], 2015). The closest of the seven capabilities to wellbeing - personal and social capability - is underpinned by self and social references in ways similar to Nussbaum's (2011) capabilities approach, where there is an attempt to merge central capabilities with necessary functional (outcome-based) attributes. Comparing progress across capabilities should make it possible to measure how well a person's life is fairing, and of how well a person's life is fairing relative to others (See Chapter Two). The key ideas for personal and social capability are organised into four interrelated elements: self-awareness; self-management; social awareness and social management (ACARA, 2015). Under self-awareness learners are encouraged

to develop a well-grounded awareness of their own emotional states, needs and perspectives; and as part of self-management learners are supported in their attempts to develop metacognitive skills strategies to manage themselves in a range of situations in order to achieve their goals. As part of social awareness, learners are encouraged to recognise others feelings and of knowing how and when to assist others within a rights respecting culture; and under social management learners are supported in their attempts to work effectively with others and to resolve conflict with positive outcomes. The self and social awareness and management focus is redolent of Nussbaum's (2011) notion of the good (capable) life being one where young people can reflect critically in order to participate in the political world and the world of living with others (functionings).

The policy intention is that personal and social capability skills are addressed across all learning areas and at every stage of learners schooling (ACARA, 2015). That said health and physical education is specifically highlighted as the learning area with the highest proportion of content linked to personal and social capability. Within health and physical education policy the advice is that adopting a strengths-based approach (one of five propositions that shape the entire health and physical education curriculum) is a helpful way for learners to develop a range of interpersonal skills such as communication, negotiation, teamwork and leadership, and an appreciation of diverse perspectives (ACARA, 2015). As the introduction of the first national curriculum in Australia is still ongoing it will be a little while before evidence gathered from practice filters back and informs the extent to which policy plans are being coherently implemented. For the present, it is worth noting that in wellbeing specifically, a psychologically-informed focus on capabilities e.g., personal attributes such as resilience, courage and determination and social dimensions such as group learning is very different from cognitive perspective on wellbeing which emphasizes more the importance of reflecting critically on happiness and personal decision-making (See Chapter Two). Furthermore, there may be concerns about how developmental accounts such as a capabilities/functionings approach (with a focus on social awareness and social management) can

articulate with a focus on personal value judgements (with a focus on self-awareness and self-management). This is especially so when national arrangements need to coherently link with state and territory based responsibilities for curriculum implementation.

Wellbeing policy and practice - the context in New Zealand

In New Zealand, from the early 1990s onwards there have been various revisions to their outcomes-focused national curriculum arrangements. These revisions have enabled academic and policy evaluations to comment on progress and consider their implications for education and schooling. Soutter et al., (2012) exploration of the language used in the New Zealand curriculum, considers that there is now a clear alignment between New Zealand curriculum arrangements and contemporary wellbeing scholarship, as evident through policy advice emphasizing the importance of coherence and of making natural and feasible (rather than forced) integrated curriculum connections across learning areas. However, in similar ways to Formby and Wolstenholme (2012), Soutter et al., (2012) also found that as learners' progressed through secondary schooling there was increasing evidence of learning experiences being dominated by assessment-related subject tasks. Therefore, quite how a heightened emphasis on testing and evaluation can merge with wellbeing curriculum intentions (and their supporting theory and policy advice) is likely to be an important matter in the future, as currently wellbeing related areas are insufficiently evident in learners' qualifications records (see Chapter Four). Thus, Soutter et al., (2012, p. 135) considers there is a need to 'provide a feasible and flexible structure for holistic assessment of student achievement, resulting in a multi-faceted view of academic success that encompasses wellbeing.'

Fuelled by an interest in improving outcomes for young people aged 12 to 19 years with, or at risk of developing, mild to moderate mental health issues (estimated to be around one fifth of young people during their adolescent years), the New Zealand Government (2015) completed a wellbeing review of progress in 68 secondary schools. The review found that support for wellbeing varied

across schools with 11 of the 68 schools (16.2%) sampled being well-placed to promote and respond to learners wellbeing while 39 schools (57.3%) had elements of good practice that could be built on. The remaining 18 schools (26.5%) faced more major challenges with some schools being overwhelmed by various issues and unable to adequately promote learners wellbeing. Therefore, while there was evidence of rights-respecting relationships and connecting care information with academic guidance when identifying and responding to wellbeing issues, learners would benefit from more teachers asking them about their experiences and involving them in decisions about the quality of their school life as 'student voice' varied from school to school. Learners would also benefit from schools being more deliberate in promoting wellbeing in the curriculum. To improve matters it is considered that the Ministry of Education should provide examples of possible approaches to learners' wellbeing which are strongly aligned to the health and physical education learning area and which support the development of the key competencies. Additionally, promoting meaningful and innovative assessment practice should help deliver more manageable assessment arrangements (New Zealand Government, 2015).

Even though it is possible that emphasising the particular contribution of health and physical education for improving learners' wellbeing could run counter to a more obvious whole school approach (see Chapter Six), it is worth reviewing some of the interrelated policy-planning-pedagogy issues associated with wellbeing *through* health and physical education, as this is also the approach being taken in Australia. Sinkinson and Burrows (2011) consider that as areas such as mental health cover sensitive concerns like diversity, discrimination, body shape and relationships that it clearly matters how learning and teaching takes place. In this respect, Sinkinson and Burrows (2011, p. 58) bemoan the twinning of health and physical education, as it leaves the teaching of health education prone 'to the mercy of physical education teachers whims.' While no empirical data is produced to support this assertion, it does raise the question of the contrast there might be between a teacher as subject knowledge expert and teacher as health professional when it comes to engaging with sensitive issues (see Chapter Eight) and when it comes to wellbeing being seen as a

whole school responsibility for all teachers (see Chapter Four). Sinkinson and Burrows (2011) - as with Formby and Wolstenholme (2012) - are concerned that in this context, teachers might play it safe and stay within their comfort zones, with as a consequence learning become increasingly shallow and dull. If this happens, it would ‘in the face of inequalities in youth health and wellbeing ... (become) ... a highly political statement about priorities, privileges and disadvantages’ (Sinkinson & Burrows, 2011, p. 61). In terms of how health education might be redefined to provide greater recognition of societal and global wellbeing ambitions, Sinkinson and Burrows (2011) recommend a more learner responsive approach, where teachers are committed to diversity, school improvement and teacher effectiveness; a series of ambitions which are broadly similar to those outlined by Weare (2015).

Future Directions

Surrounding this chapter are arguments about the extent to which wellbeing policies makes a public good difference. Inevitably, this is a complex area to consider as without clear criteria and goals it is often difficult to define wellbeing (*in theoretically rigorous ways*), elaborate on its connections with education and society (*policy relevance*) and to measure progress (*empirically robust findings*). These various challenges are likely to impact on policy implementation, and it is not surprising that what emerges from a review of developments in England, Australia and New Zealand are variable degrees of policy coherence and clarity. More positively however it could be argued that within our ever more complex, dynamic and interconnected lives it is good that public policies are trying to engage with a broader and more nuanced conception of wellbeing within a policy context which recognizes the limitations of relying more narrowly on certain fixed measurements of health and economic satisfaction. In this light, it is also helpful that education is a key component of wellbeing policies. Furthermore, findings such as those from The Children’s Society (2015) provide a useful benchmark reference for tracking future progress, and for identifying emerging wellbeing-related priorities requiring policy attention. Following this line of progress, the potential exists for the

aspirations of policy stakeholders to more closely connect with the structural arrangements operating in schools and with teachers' professional role; and most crucially with the vital matter of what young people think about their wellbeing.

Summary of key findings

- Wellbeing is increasingly prominent in public policy - albeit in different guises and driven by different objective and subjective influences
- The public policy process is frequently complex and subject to multi-various influences e.g., policy conditions, structural considerations and agency considerations
- Wellbeing is of interest to a range of government departments as well as policy stakeholders in different supra national bodies and third sector groups
- Three areas of theoretical thinking (objective and/or subjective measurements of wellbeing, pragmatic subjectivism and strengths-based approaches) which have the potential to inform policy were reviewed
- Wellbeing policy and practice developments in England, Australia and New Zealand reveal contrasting: theoretical influences; curriculum planning intentions; strategies for pedagogical engagement and approaches for measuring wellbeing
- Reviewing whether public good policies are theoretically rigorous, relevant and empirically robust is an effective way of analyzing policy coherence

Reflective tasks

- Do you consider that wellbeing should become an increasingly prominent part of educators' professional responsibility?
- Are you surprised by the findings of The Children's Society (2015) report?
- Is it possible (and wise) to let learners decide on what is important for their own wellbeing (pragmatic subjectivism)?

- Do you think learners' wellbeing should be measured in schools?
- Is it possible for teachers to be a subject knowledge expert as well as a health and wellbeing professional?

Further readings

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